Please type a plus sign (+) inside this box	+	l
---	---	---

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	DEPIERRI, Thomas M.
Title	Bulk Material Loading Device
Group Art Unit	
Examiner Name	
Attorney Docket Number	7144-1

I hereby appoint:		4 (\$40) \$20) \$400 \$400 \$100 \$200 \$200			
Practitioners at 0 OR Practitioner(s) na	Customer Number 21184				
	Name	Registra PATEN 021175 HARK OFFICE			
·					
	agent(s) to prosecute the application id				
	States Patent and Trademark Office con				
· — ·	espondence address for the above-identi ned Customer Number.	fied application to:			
OR		Place Customer			
Practitioners at Cus	stomer Number	Number Bar Code Label here			
OR		Label Nete			
Firm <i>or</i> Individual Name					
Address					
Address					
City	5	State Zip			
Country					
Telephone	<u> </u>	Fax			
I am the:	·				
Applicant/Invent	or.				
Assignee of reco	ord of the entire interest. See 37 CFR 3.7	' 1.			
	r 37 CFR 3.73(b) is enclosed. (Form PTC				
2SIGNATURE of Applicant or Assignee of Record					
Thomas (M. Dolland					
oc/a=/2=03					
		when representative(s) are required. On health at 10 of			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
☐ *Total offor	ms are submitted.				

DEPIERRI, Thomas M.

7144-1

COMPLETE IF KNOWN

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1 63)

Attorney D cket Number

First Named Inv ntor

(37 CFR 1	.63)	Application Number					
	Filing Date						
Declaration Submitted OR	Declaration Submitted after Initial	Art Unit					
with Initial	Filing (surcharge (37 CFR 1.16 (e))	741 01111					
Filing	Filing (37 CFR 1.16 (e)) required)		Examiner Name				
As the below named inventor, I here	eby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Bulk Material Loading De	evice						
	(Title of the Inv	vention)	-				
the specification of which	(Tide of the fin	rentiony					
V is awarded bounds							
is attached hereto							
or [
was filed on (MM/DD/YYYY)		as United States Ap	pplication Number	or PCT International			
L							
Application Number	and was amended	d on (MM/DD/YYYY)	-	(if applicable).			
				(ii applicable).			
I hereby state that I have reviewed and	d understand the contents of	the above identified specif	ication, including t	he claims, as amended by			
any amendment specifically referred to	above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United							
States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is							
claimed.	monasonal application						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
			H				
Additional foreign application pur	nhers are listed on a supplem	nental priority data sheet B	TO/SB/02B attack	ned berete:			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

DECLARATION — Utility or Design Patent Application

		Г						
Direct all correspondence to: Customer Number or Bar Code Label			OR		Соп	espondence address below		
Name		02	184	}				
		MTEX0211	75 MARK O	FFICE				
Address								
		<u> </u>						
City			State					ZIP
			•					
Country	Tele	phone						Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR :		A petition h	as bee	en filed	for t	his uı	nsigr	ned inventor
Thomas M.			Fam:!!	. Nama	DeF	Pierri		
(first and middle [if any])			,	y Name mame				_
Inventor's 1924 () (1)						06/25/2003 Date		
Baton Rouge		LA		US				US
Residence: City				Country				Citizenship
5710 Blue Heron Court								
Mailing Address								
Baton Rouge	Baton Rouge LA			70817			us	
City State		State	ZIP					Country
NAME OF SECOND INVENTOR:		A petition ha	s been	filed fo	or this	s uns	igne	d inventor
Given Name (first and middle [if and)								
(first and middle [if any]) or Surname								
Inventor's Signature Date								
ognature		<u> </u>						Date
Booldanas City		State						Ciales as bis
Residence: City State Country Citizenship								
Mailing Address								
								-
City		State	-	ZIP				Country
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								